



Complete Summary

TITLE

Nursing home resident satisfaction: mean section score for "Dining" questions on Nursing Home Resident Survey.

SOURCE(S)

Nursing home resident survey. South Bend (IN): Press Ganey Associates, Inc.; 2004. 4 p.

Measure Domain

PRIMARY MEASURE DOMAIN

Patient Experience

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

SECONDARY MEASURE DOMAIN

Does not apply to this measure

Brief Abstract

DESCRIPTION

This measure is used to assess the mean score for the questions in the "Dining" section of the Nursing Home Resident Survey.

The "Dining" section is one of ten sections that comprise the [Nursing Home Resident Survey](#). Mean section scores are reported for each section of this survey. In addition, an "Overall Facility Rating" score is reported.

RATIONALE

1. Patient satisfaction is both an indicator of quality of care, and a component of quality care.

In 2001, the Institute of Medicine (IOM) advocated a patient-centered model of care (Crossing the Quality Chasm: A New Health System for the 21st Century). In part, this is a reflection of the growing understanding that

"...patients constantly judge the motives and competence of caregivers through their interaction with them. This judgment is a very personal one, based on perceptions of care being responsive to patients' "individual needs," rather than to any universal code of standards (McGlynn, 1997). When these individual needs are perceived as being met, better care results. Lohr (1997) notes: "Inferior care results when health professionals lack full mastery of their clinical areas or cannot communicate effectively and compassionately." In short, when patients perceive motives, communication, empathy, and clinical judgment positively, they will respond more positively to care...Sobel (1995) claims that improved communication and interaction between caregiver and patient improves actual outcome. Donabedian (1988, 1744) notes that "...the interpersonal process is the vehicle by which technical care is implemented and on which its success depends" (from Press [2002] Patient Satisfaction: Defining, Measuring, and Improving the Experience of Care, Health Administration Press).

It is clear that patients quite actively evaluate what is happening to them during the experience of care. The degree to which the patient judges the care experience as satisfactory "...is not only an indicator of the quality of care, but a component of quality care, as well" (Press, 2002).

Patient Satisfaction has been linked to the following clinical outcomes: Clinical Quality (e.g., Hemoglobin A1c levels, cholesterol levels, lower bed disability days); Chronic Disease Control; Compliance; Drug Complications; Quality of Life; Emotional Health Status; Mental Health; Physical Functioning; Physical Health Status; Post-Surgery Complications; Post-Surgery Recovery Times; Risk-Adjusted Mortality Rates; Unexpected Mortality; and Work Effectiveness (Clark, Drain, Malone, 2004).

2. In addition to its connection to quality of care and clinical outcomes, Patient Satisfaction has been linked to the following:
 - Topline (Revenue): Loyalty; Volume; Physician Satisfaction; Patient's Trust in Provider; Retention; Employee Satisfaction
 - Bottomline (Expenses): Reduction in Expenses; Reduction in Length of Stay; Reduction in Complaints; Reduction in Malpractice Claims; Direct Measures of Financial Performance (e.g., bond rating, core margin, earnings per adjusted admission, market share, net margin, profit margin) (Clark, Drain, Malone, 2004)

PRIMARY CLINICAL COMPONENT

Nursing home resident satisfaction

DENOMINATOR DESCRIPTION

Nursing home residents who answered at least one question in the "Dining" section of the Nursing Home Resident Survey during the reporting period

Residents who are unable to respond to the survey even with assistance and deceased residents are excluded from sampling.

NUMERATOR DESCRIPTION

The mean of all the residents' scores for the questions from the "Dining" section of the Nursing Home Resident Survey

Refer to the "Press Ganey's Nursing Home Survey: Calculation of Scores Information" document listed in the "Companion Documents" field for additional details.

Evidence Supporting the Measure

EVIDENCE SUPPORTING THE CRITERION OF QUALITY

- A formal consensus procedure involving experts in relevant clinical, methodological, and organizational sciences
- A systematic review of the clinical literature
- Focus groups
- One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Use of this measure to improve performance

EVIDENCE SUPPORTING NEED FOR THE MEASURE

Becker BW, Kaldenberg DO. Factors influencing the recommendation of nursing homes. Mark Health Serv2000 Winter; : 23-8.

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

Internal quality improvement

Application of Measure in its Current Use

CARE SETTING

Long-term Care Facilities

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Measure is not provider specific

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Single Health Care Delivery Organizations

TARGET POPULATION AGE

Unspecified

TARGET POPULATION GENDER

Either male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

Unspecified

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

Unspecified

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

End of Life Care
Living with Illness

IOM DOMAIN

Patient-centeredness

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

Nursing home residents

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

Nursing home residents who answered at least one question in the "Dining" section of the Nursing Home Resident Survey during the reporting period

Exclusions

Residents who are unable to respond to the survey even with assistance and deceased residents are excluded from sampling.

RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are equally eligible to appear in the numerator

DENOMINATOR (INDEX) EVENT

Institutionalization

DENOMINATOR TIME WINDOW

Time window is a fixed period of time

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

The mean of all the residents' scores for the questions from the "Dining" section of the Nursing Home Resident Survey

Refer to the "Press Ganey's Nursing Home Survey: Calculation of Scores Information" document listed in the "Companion Documents" field for additional details.

Exclusions
Unspecified

MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

NUMERATOR TIME WINDOW

Encounter or point in time

DATA SOURCE

Administrative data and patient survey

LEVEL OF DETERMINATION OF QUALITY

Not Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Non-weighted Score/Composite/Scale

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Analysis by subgroup (stratification on patient factors, geographic factors, etc.)

DESCRIPTION OF ALLOWANCE FOR PATIENT FACTORS

Data may be reported out separately for various kinds of patient groups at the client's request.

STANDARD OF COMPARISON

External comparison of time trends
Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

The Nursing Home instrument was re-validated in 2002 and found to be psychometrically sound across a wide variety of tests of validity and reliability. Refer to "Nursing Home: Psychometrics" (Press Ganey Associates, 2003) for details.

EVIDENCE FOR RELIABILITY/VALIDITY TESTING

Nursing home psychometrics. South Bend (IN): Press Ganey Associates, Inc.; 2003. 7 p.

Identifying Information

ORIGINAL TITLE

Nursing Home Resident Survey, Dining.

COMPOSITE MEASURE NAME

[Nursing home resident satisfaction: overall facility rating score on the Nursing Home Resident Survey.](#)

DEVELOPER

Press Ganey Associates, Inc.

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

1995 Jan

REVISION DATE

2002 Jan

MEASURE STATUS

This is the current release of the measure.

SOURCE(S)

Nursing home resident survey. South Bend (IN): Press Ganey Associates, Inc.; 2004. 4 p.

MEASURE AVAILABILITY

The individual measure, "Nursing Home Resident Survey, Dining," is published in the "Nursing Home Resident Survey."

For further information, contact: Press Ganey, 404 Columbia Place, South Bend, Indiana 46601; telephone: 800-232-8032; fax: 574-232-3485; e-mail: sgesell@pressganey.com; Web site: www.pressganey.com.

COMPANION DOCUMENTS

The following is available:

- Press Ganey's nursing home survey: calculation of scores information. South Bend (IN): Press Ganey Associates; 3 p.

For further information, contact: Press Ganey, 404 Columbia Place, South Bend, Indiana 46601; telephone: 800-232-8032; fax: 574-232-3485; e-mail: sgesell@pressganey.com; Web site: www.pressganey.com.

NQMC STATUS

This NQMC summary was completed by ECRI on March 29, 2006. The information was verified by the measure developer on April 14, 2006.

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All inquiries regarding the measure should be directed to the [Press Ganey Web site](http://www.pressganey.com) or e-mail Sabina B. Gesell, Ph.D. at sgesell@pressganey.com.

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